

## APPLICATION DATA SHEET

Electronic Version v14

Stylesheet Version v14.0

<b>Title of Invention</b>	GRADIENT COIL AND METHOD FOR CONSTRUCTION
<b>Application Type :</b>	regular, utility
<b>Attorney Docket Number :</b>	141141
<b>Correspondence address:</b>	
<b>Name:</b>	Cantor Colburn LLP
<b>Address-1 of Mailing Address:</b>	55 Griffin Road South
<b>Address-2 of Mailing Address:</b>	
<b>City of Mailing Address:</b>	Bloomfield
<b>State of Mailing Address:</b>	CT
<b>Postal Code of Mailing Address:</b>	06002
<b>Country of Mailing Address:</b>	US
<b>Phone:</b>	860-286-2929
<b>Fax:</b>	860-286-0115
<b>E-mail:</b>	
<b>Inventors Information:</b>	
<u>Inventor 1:</u>	
<b>Applicant Authority Type:</b>	Inventor
<b>Citizenship:</b>	US
<b>Given Name:</b>	Timothy
<b>Middle Name:</b>	John
<b>Family Name:</b>	Havens
<b>Residence:</b>	
<b>City of Residence:</b>	Florence
<b>State of Residence:</b>	SC
<b>Country of Residence:</b>	US
<b>Address-1 of Mailing Address:</b>	1208 Madison Ave.
<b>Address-2 of Mailing Address:</b>	
<b>City of Mailing Address:</b>	Florence
<b>State of Mailing Address:</b>	SC
<b>Postal Code of Mailing Address:</b>	29501
<b>Country of Mailing Address:</b>	US
<b>Phone:</b>	

**Fax:**

**E-mail:**

Inventor 2:

**Applicant Authority Type:** Inventor  
**Citizenship:** US  
**Given Name:** Michael  
**Family Name:** Sellers  
**Residence:**  
**City of Residence:** Florence  
**State of Residence:** SC  
**Country of Residence:** US  
**Address-1 of Mailing Address:** 3326 Stockton Dr.  
**Address-2 of Mailing Address:**  
**City of Mailing Address:** Florence  
**State of Mailing Address:** SC  
**Postal Code of Mailing Address:** 29501  
**Country of Mailing Address:** US  
**Phone:**  
**Fax:**  
**E-mail:**

Inventor 3:

**Applicant Authority Type:** Inventor  
**Citizenship:** US  
**Given Name:** Delton  
**Family Name:** Grey  
**Residence:**  
**City of Residence:** Florence  
**State of Residence:** SC  
**Country of Residence:** US  
**Address-1 of Mailing Address:** 732 Lancelot Dr.  
**Address-2 of Mailing Address:**  
**City of Mailing Address:** Florence  
**State of Mailing Address:** SC  
**Postal Code of Mailing Address:** 29505  
**Country of Mailing Address:** US  
**Phone:**  
**Fax:**  
**E-mail:**

Publication Information:

Suggested Figure for Publication -  
Suggested Classification -  
Suggested Technology Center -  
Total Number of Drawing Sheets - 3

Assignee 1:

**Organization Name:** GE Medical Systems Global Technology Company  
**Address-1 of Mailing Address:** 3000 North Grandview Blvd.  
**Address-2 of Mailing Address:**  
**City of Mailing Address:** Waukesha  
**State of Mailing Address:** WI  
**Postal Code of Mailing Address:** 53188  
**Country of Mailing Address:** US  
**Phone:**  
**Fax:**  
**E-mail:**